VERMONT TOBACCO EVALUATION & REVIEW BOARD

Minutes of the Board Meeting

January 10, 2008 Approved February 6, 2008

Members Present: Theodore Marcy, MD, Chair, Brian Flynn, ScD., Vice Chair, Edna

Fairbanks Williams, Rep. Patsy French, Amy Brewer, Erica Peters,

Senator Sara Kittell, Commissioner Mike Hogan, Coleen Krauss, Gregory

MacDonald, MD

Designees Present: Sheri Lynn for Acting Commissioner Moffatt, Kate O'Neill for

Commissioner Cate

Guests: Catherine Suiter, FAHC, Iowna Sturges, Department of Health, David

Cranmer, Coalition for a Tobacco Free Vermont, Bruce Cunningham,

Kate Larose, Department of Education	
CALL TO ORDER: Dr. Marcy opened the meeting at 3:07 p.m.	
PUBLIC COMMENT: Mr. Cunningham shared his analysis of the FY2006 Synar Report for tobacco retailer compliance, including his ranking of states. He doesn't believe we have done anything to comply with Vermont law, only the federal standard. He pointed to a yet-to-be published research project by Joe DiFranza. He said the World Health Organization asked Dr. DiFranza to expand it to include world data and it will contain a section devoted to Vermont's statute. Mr. Cunningham supports a clarification in the current statute; his proposed language does not change the intent or requirements of the law. He would like the board to agree with his recommendations. REVIEW OF MINUTES: The board approved the minutes of the	Bruce Cunningham Minutes approved
December 12, 2007 board meeting. REPORT: EVALUATION COMMITTEE:	- AT A G() 0
State of Tobacco Control: Dr. Marcy shared the results of the American Lung Association's State of Tobacco Control, embargoed until tomorrow. Vermont earned the same grades as last year: tobacco control program funding (B), cigarette excise tax (B), youth access (A) for clean indoor air (A). RTI Annual Report: Dr. Marcy reviewed the highlights from RTI's annual program report (see attached presentation). RTI's conclusions: Adult smoking prevalence: Rate of decline not different from rest of U.S. Increasing number of smokers are using counseling services, but these are used by only a minority during a quit attempt Health care providers are a substantial and increasing source of referrals to services High perceived access to cessation programs; increasing perceived access to - and use of - meds Youth Prevention: Data from YTS and YRBS not available, so rates not in annual report Community Coalitions are active in youth prevention Nearly all schools have a tobacco policy in place Several have youth cessation services About 30% of children are exposed to an evidence based tobacco prevention curriculum	 ALA State of Tobacco Control RTI Annual Report AJPH Journal Article, Dr. Farrelly Evaluation Work Specifications (VOTE) Board Annual Report

Secondhand Smoke:

- Increase in policies banning smoking in home and car not observed in NY state; suggests Vermont program effective
- However, these increases have leveled off
- Exposure in cars remains high

Overall:

- Some indicators are positive
- Others are not
 - Wrong direction in some indicators (e.g., attitudes)
 - Slow progress in adult prevalence
- "Should look at mix and allocation of funds across strategies"
 - Can we use media more effectively to drive smokers towards cessation services?
 - What is a cost effective mix of counseling services?
- "Look for opportunities to make changes that might yield further gains"
- o assistance to those wanting to quit on their own Dr. Marcy said committees should look at sections of the report relevant to them.

American Journal of Public Health article: Dr. Marcy said Matthew Farrelly, from RTI, was recently published in the American Journal of Public Health (released online before publication). The article addressed a persistent question among stakeholders: Do expenditures on tobacco control program have any impact on reducing adult smoking prevalence? And if there is a decrease in the smoking rate, could it be just related to increased cigarette excise tax? Dr. Farrelly, an economist, used models to get at these questions. There is quite a bit of data on differences on program expenditures and observed reductions in smoking prevalence. Controlling for increases in taxes, base level of tax and a number of other aspects, RTI's analysis demonstrated, within limitations, that cumulative increases in states' program expenditures were independently associated with declines in adult prevalence. The report demonstrated past expenditures were important over time. The effect of tax and programs funding varied by age – tax increases had the most impact on 18-24 year olds and program had a greater impact on smokers 25 -39 year olds. RTI looked at the smoking rate if every state had spent the minimal amount recommended by the CDC from the beginning and estimated there would be seven million fewer smokers today.

Independent evaluation RFP work specifications: RTI's contract expires on June 30, 2008. It is time for the board to issue a new RFP (two years with possible two-year extension). The evaluation committee met twice to develop recommended FY2009 and FY2010 work specifications for the board's consideration. It is a challenge to develop as we will not know the budget until the FY09 appropriation is determined. Dr. Marcy and Ms. Ryan highlighted major changes: a) one report for all cessation services to reflect each component (phone, hospital, web, etc) as part of an integrated program. b) The annual report would be due in April rather than the fall to help the board

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examine possible program changes in the spring-summer.	
Motion: To accept work specifications as written. Seconded. Pasunanimously.	ssed
The RFP will be issued in February. The deadline for submissions April. The Evaluation Committee will review and make a recommendation for a board vote at the May meeting.	s is
The annual board report is at the printers and will be delivered to Governor and the Legislature on January 15. Ms. Ryan shared the executive summary and thanked members and staff from each department for their help. Ms. Ryan will mail hard copies to mem She sent an online version to members last week.	
ANNUAL REPORT, DEPARTMENT OF LIQUOR CONTROCOMMISSIONER Hogan shared highlights from DLC's annual report (due at the Legislature on January 15). In calendar year 2007, the department conducted 1,434 compliance tests with a compliance of 87%. For FY2007, it conducted 1,512 tests for an 88% compliar rate. Of the 188 people that failed the test, 86 asked for an ID and sold and 102 did not ask for an ID. That is a real concern to the department. It is pursuing H.149, in the Senate now, to allow DLC issue licenses. It does not always receive accurate information fro town clerks who currently issue licenses. DLC is researching what other states are doing to license clerks. A license would travel with clerk and may give DLC an idea of repeat offenders. He hopes by end of the year, DLC may have draft legislation for the next bient Commissioner Hogan noted the Youth Health Survey indicates may teens are getting their cigarettes from social sources, not stores. He pointed to the graph in the back of report that shows the success report of the graph in the back of report that shows the success report. We see the said DLC will continue to work on improven as 90% compliance is the law. There are things that are not within department's control such as reading and language skills. There we some discussion about Vermont's penalty structure. DLC provide overview of fines collected and the board will look at it next mont Commissioner Hogan said when the Legislature proposed reducing first offense to a fine, DLC opposed it. The Enforcement Commit will meet later this month to discuss a possible recommendation to change the penalty structure. Dr. Marcy asked board members to the enforcement section of the board's report before the February board meeting.	rate ance still C to mouth the the nium. cost de ate of ments in the vas d an th. ag the tee o cread
REPORT: DEPARTMENT OF EDUCATION: Ms. Larose reviewed the draft RFP for FY2009 school-based grants. It is simit to last year's process. Grants will only be awarded one year at a til Previously it was two years, contingent upon funding, but the DO financial department requires a one-year process. The previous RI asked for end-of-the year information; including curriculum implementation. Grantees will now only be asked to provide this	me. E

information in their end-of-the year reports. Grantees will be asked in the RFP about challenges and plans for future implementation instead. A budget narrative is now included. The program goals are now worded differently. There are 1,300 fewer students statewide. Ms. Lynn asked about the dollar cap per student. She asked if there will be a cost savings, what is the department's plan. Ms. Larose said there hasn't been a specific discussion. There may be extra dollars to allocate for VTLSP but it won't be included in this application as she is not sure how many schools will apply for money. Ms. Brewer asked if DOE requires schools implement health fairs. She receives a lot or requests for support and they are poorly attended and are not effective. Ms. O'Neill said they are not encouraged and are not a best practice. DOE will provide examples of effective approaches to the related program goal at the regional trainings. Ms. Larose will also include examples in the RFP. Ms. Lynn asked Ms. Rose if she could include the annual partners' statewide meeting as a requirement of the grant. Ms. Rose said that many coordinators complained about driving to the meeting in Rutland last fall. DOE and VDH will discuss ideas. Ms. Lynn asked if DOE could require funded schools to participate in the voluntary Youth Health Survey. Ms. Lynn said it costs a lot of money and it provides much more information than just prevalence. Ms. O'Neill and Ms. Larose did not think that was feasible. Ms. Krauss asked if faith-based organizations could be added as potential partners.

LEGISLATIVE UPDATE: Rep. French said the term appointment bill has been drafted. House Human Services chair, Rep. Pugh has signed on as has most of the committee where the bill should land. Ms. Ryan reviewed the board's recommendations:

- 1. Increase Funding for the Tobacco Control Program: the board recommends an increase of \$3.2 million for a total of \$8.4 million in program funds for FY2009.
- 2. Allocate Funding to the Tobacco Trust Fund
- 3. Support H.149 to give the Department of Liquor Control (DLC) the ability to issue each retail tobacco license and impose a minimum age to sell tobacco. H.149 passed the House of Representatives in March 2007 and is currently in Senate Economic Development, Housing and General Affairs.
- 4. Support ban of home delivery sales of tobacco products.
- 5. Shift term expiration date of Tobacco Evaluation and Review Board members from February 1 to July 1.

Other recommendations:

- 1. Develop model legislation for a complete ban of smoking in all Vermont workplaces. The Enforcement Committee will begin to discuss this at its meeting later this month.
- 2. Develop smoke-free multi-unit housing residences, both existing and planned.

Dr. Marcy said the board may have opportunities to testify and don't

• Legislative Update

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*	. In the meantime, they will meet with ant to discuss the board's FY2009 budget	:
ADJOURN: Ms. O'Neill annotwo months and Ms. Larose w return. She thinks she will be meeting was adjourned at 4:45		
Signed by:	Approved by:	
Rebecca L. Ryan, MEd Administrator	Theodore Marcy, M.D., MPH Chair	